



MHSPHP

Military Health System Population Health Portal



2nd Thursday of the Month MHSPHP Metrics Forum

Asthma September 2013

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Overview

- Methodology of the HEDIS[®] metrics
- How does the action list differ from the metrics
- FAQs



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Asthma HEDIS® Metric

The percentage of members 5-64 years of age during the measurement year who were identified as having persistent asthma and who were appropriately prescribed medication during the measurement year.

- 5-11
- 12-18
- 19-50
- 51-64
- Total (5-64)



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Denominator

- 5-64 years old
- Continuously enrolled in PRIME (11 of 12 months) both the measurement year and the year prior
- Met at least one of the 4 asthma criteria in the measurement year and the year prior
 - Does not have to be the same criteria each year



Asthma Criteria*

- 4 Outpt visits with an asthma diagnosis + 2 dispensing events of asthma medications
- 1 ER visit with asthma as Primary diagnosis
- 1 hospitalization with asthma as primary diagnosis
- 4 dispensing events of asthma medications
 - If all meds dispensed in the 12 month period were leukotriene modifiers, pt must also have at least one asthma diagnosis encounter during that 12 months

Codes to Identify Denominator Patients

- ICD9 Codes to identify Asthma encounters

Code	Definition
493	Asthma [493]
493.90	Asthma NOS
493.92	Asthma NOS w (ac) exac
493.91	Asthma w status asthmat
493.9	Asthma, unspecified [493.9]
493.82	Cough variant asthma
493.81	Exercise ind bronchospasm
493.01	Ext asthma w status asth
493.02	Ext asthma w(acute) exac
493.0	Extrinsic asthma [493.0]
493.00	Extrinsic asthma NOS
493.12	Int asthma w (ac) exac
493.11	Int asthma w status asth
493.1	Intrinsic asthma [493.1]
493.10	Intrinsic asthma NOS
493.8	Other forms of asthma [493.8]



Medications that identify Asthmatics

Description	Prescriptions		
Antiasthmatic combinations	• Dyphylline-guaifenesin	• Guaifenesin-theophylline	
Antibody inhibitor	• Omalizumab		
Inhaled steroid combinations	• Budesonide-formoterol	• Fluticasone-salmeterol	• Mometasone-formoterol
Inhaled corticosteroids	• Beclomethasone • Budesonide • Ciclesonide	• Flunisolide • Fluticasone CFC free • Mometasone	• Triamcinolone
Leukotriene modifiers	• Montelukast	• Zafirlukast	• Zileuton
Long-acting, inhaled beta-2 agonists	• Arformoterol • Salmeterol	• Formoterol	
Mast cell stabilizers	• Cromolyn		
Methylxanthines	• Aminophylline • Dyphylline	• Theophylline	
Short-acting, inhaled beta-2 agonists	• Albuterol • Levalbuterol	• Metaproterenol • Pirbuterol	



Asthma Metric specs changes

- Major Change in way inhaled medication dispensing events calculated in Technical Specifications for 2013
 - 2012: all dispensing events of the same inhaled med dispensed on the same date counted as 1 dispensing event
 - so they could get 1 for home, school, car, childcare
 - 2013: Each inhaler dispensed is a separate dispensing event
 - Above example would now be 4 dispensings instead of 1
 - Impact: Saw more mild intermittent asthmatics on the list and a slight drop in metrics
 - *PROPOSED CHANGE FOR 2014:* "All⁸ inhalers

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Denominator Exclusions

- Patients with history of these diagnoses are excluded from the Asthma list and metric

518.81	Acute respiratory failure
491	Chronic bronchitis [491]
491.8	Chronic bronchitis NEC
491.9	Chronic bronchitis NOS
491.1	Mucopurulent chronic bronchitis
491.22	Observed chronic bronchitis with acute bronchitis
491.21	Observed chronic bronchitis with (acute) exacerbation
491.20	Observed chronic bronchitis without exacerbation
491.2	Obstructive chronic bronchitis [491.2]
491.0	Simple chronic bronchitis
493.21	Chronic obstructive asthma with status asthmaticus
493.22	Chronic obstructive asthma with (acute) exacerbation
496	Chronic airway obstruction NEC
493.20	Chronic obstructive asthma NOS
493.2	Chronic obstructive asthma [493.2]
277.02	Cystic fibrosis with pulmonary manifestation
277.00	Cystic fibrosis without ileus
277.0	Cystic fibrosis [277.0]
277.09	Cystic fibrosis NEC
277.03	Cystic fibrosis with gastrointestinal manifestation
277.01	Cystic fibrosis with ileus
492	Emphysema [492]
492.8	Emphysema NEC
492.0	Emphysematous bleb
491.22	Observed chronic bronchitis with acute bronchitis
491.21	Observed chronic bronchitis with (acute) exacerbation
491.20	Observed chronic bronchitis without exacerbation
491.2	Obstructive chronic bronchitis [491.2]
518.2	Compensatory emphysema
518.1	Interstitial emphysema

- Pt had at least ONE dispensing event of controller medication:

Description	Prescriptions		
Antiasthmatic combinations	• Dyphylline-guaifenesin	• Guaifenesin-theophylline	
Antibody inhibitor	• Omalizumab		
Inhaled steroid combinations	• Budesonide-formoterol	• Fluticasone-salmeterol	• Mometasone-formoterol
Inhaled corticosteroids	• Beclomethasone • Budesonide • Ciclesonide	• Flunisolide • Fluticasone CFC free	• Mometasone • Triamcinolone
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Methylxanthines	• Aminophylline • Dyphylline	• Theophylline	



Asthma Action List versus HEDIS[®]

Action List

- Met 1 of the 4 Asthma criteria in the last 12 months*
- Does not meet HEDIS[®] exclusion criteria
- No age restrictions
- Prime and Plus

HEDIS[®]

- Met 1 of the 4 Asthma criteria in the last 12 months (measurement year) and met one criterion the **PRECEDING 12 months***
- Does not meet HEDIS[®] exclusion criteria

*List typically has 2-3 times more patients because of this difference



FAQ: when do pts fall off list

- Patients fall off the list when their diagnoses or medication dispensings are over 12 months old and the patient no longer meets the criteria in the last 12 months
 - They will fall off the metric when they don't meet a criteria in the preceding year
- If you fix the ICD9 code for direct care encounters, the encounter will eventually be updated in our data. The pt will fall off the list when he/she no longer meets the criteria.



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FAQ: Why is this patient on the Asthma list?

- No evidence in AHLTA of Asthma
 - Pt had to meet criteria to be on list
 - Treated with asthma meds for other condition?
 - Diagnosed/treated outside of MTF?
 - Miscoded?
 - Find reason, don't assume miscoded



Why is this patient Asthmatic?

- Asthma list shows number of each in last 12 months

Hospitalizations	ER Visits	Outpatient Visits	Dispensing Events
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
0	0	3	13
0	1	0	1
0	0	7	12
0	0	2	6
0	0	0	8
0	0	0	4
0	0	5	19
0	0	0	4
0	0	1	11
0	0	1	29
0	0	0	8
0	0	1	4
0	0	0	5
0	0	0	4



What else is on the patient list?

Rx Date	Drug Name	Steroid	Steroid Rx Date	Spirometry Date	Controller	Ratio	Persistence
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6/12/2013	DULERA	DULERA	6/12/2013	2/10/2012	10	0.77	Yes
					0	0.00	No
12/6/2012	ADVAIR DISKUS	ADVAIR DISKUS	12/6/2012	11/7/2012	11	0.92	No
4/29/2013	ADVAIR DISKUS	ADVAIR DISKUS	4/29/2013	4/29/2013	5	0.83	No
1/28/2013	SINGULAIR				6	0.75	No
					0	0.00	No
6/11/2013	MONTELUKAST SODIUM	DULERA	5/29/2013	4/22/2013	18	0.95	Yes
10/10/2012	SINGULAIR				3	0.75	No
4/2/2013	FLOVENT HFA	FLOVENT HFA	4/2/2013		9	0.82	Yes
4/25/2013	ADVAIR DISKUS	ADVAIR DISKUS	4/25/2013		24	0.83	Yes
5/30/2013	MONTELUKAST SODIUM			5/16/2013	6	0.75	Yes

- RX date & Drug Name= Controller med dispensed
- Steroid is FYI only
- Spirometry testing is recommended at least q 2yrs
- Persistence is HEDIS persistence—means at least 1 asthma criterion in each of



What else is on the patient list?

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4/25/2013	ADVAIR DISKUS	ADVAIR DISKUS	4/25/2013		24	0.83	Yes
5/30/2013	MONTELUKAST SODIUM			5/16/2013	6	0.75	Yes

- Controller: number of dispensing events of Asthma controller meds
- Ratio: is the ratio of controller med dispensing events to all asthma med dispensing events. Higher ratio has been associated with lower cost care: ratio <0.5 associated with ~30% higher chance of ER visit for asthma exacerbation

Patient Detail View

CHRONIC ILLNESSES

Note: Only illnesses associated with patient are shown

Asthma

Visits				Code
06/18/2013	DIRECT	Family Practice Not Elsewhere Classified	KENNER AHC-FT. LEE	493.92 3
06/04/2013	NETWORK	Pulmonary Diseases	Office	493.90
05/21/2013	NETWORK	Pulmonary Diseases	Office	493.90
05/20/2013	DIRECT	Occupational Health Clinic	KENNER AHC-FT. LEE	493.92 0
04/23/2013	NETWORK	General Practice	Emergency Room-Hospital	493.92
03/24/2013	NETWORK		INPT	493.92

Medications		Ctrl	Ster
06/14/2013	VENTOLIN HFA		
06/03/2013	MONTELUKAST SODIUM	Y	
05/11/2013	ALBUTEROL SULFATE		
04/25/2013	VENTOLIN HFA		
04/25/2013	ADVAIR DISKUS	Y	Y

Controller Ratio: 0.68

Persistence: Y

Spirometry Date: 21 May 2013

For the last 12 months:

- Displays the date and diagnosis of the most recent 4 asthma outpt, most recent asthma ER and most recent asthma INPT encounters
- Displays most recent 4 Asthma



Why are the metrics & lists old?

- Metrics are tied very tightly to enrollment data. All enrollment , encounter , med, lab data must reflect the same period of time.
- Purchased care data comes from claims. Claims take time to be processed. Majority of claims get paid within 30 days.
- We receive the previous month's data ~ 3 wks into the following month. It takes another ~3 weeks to load & run the hundreds of queries to pull the data together
- We are looking at alternatives to make lists more timely in 3G



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Asthma Metrics

- PHDR demonstration



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- Questions?
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